ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 322534

SEPTIC: IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM

PIN # 4648 -- 56 -- 2465

APPLICANT/OWNER: Nest Homes LLC | APPLICANT ADDRESS: PO Box 3965, Mooresville NC 28117

SITE ADDRESS: 174 Twin Sisters Lane | PHONE: 980-500-1238 | ALT. PHONE

SITE DIRECTIONS: From I-77 - Exit 36 - (N) Bluefield Rd - (R) Bluefield - (L) Cornelius - (L) Twin Sisters Ln | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Cornelius Sub. Lease Lots | SECTION: 1 | LOT # 15 | LOT AREA: | DESIGN FLOW: 480 gpd | L.T.A.R.: .3

Septic Tank	1000 (gal)	STB	760	Date	10-15-22	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☑ Residence	No. Bedrooms 4
Pump Tank	1000 (gal)	PT	363	Date	10-6-22	System Description:		25% reduction		☐ Business	No. Persons 8
Pump Make		Model		Serial #		Repair System Description:		LPPPBPS		☐ Other	No. Employees
# Nitrification Fields	1	# Lines	5	Linear Ft	400 Ft	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☑ Crawl Space
Trench Width	36 in	Trench Bottom Depth (Low side)		36" max		Gravel Depth	–	☐ GRAVITY	☒ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☑ Community

Comments / Conditions: Must install traffic rated tank if deeper than 36 inches. Install drainlines on contour with the land. Do not grade, park, or drive on septic area.

INITIAL SITE SKETCH

See attached by Penninger Soil Consulting approved by ICHD 2/24/22

AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your time.

1/12/23 Supply line good

Line under road: 30" on offsite side, 26" on house side.

Drainlines 12/2/22 SH

Tanks 12/1/22 BB

1/18/23: Manifold, Alarm, Electrical, Pressure Head

Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

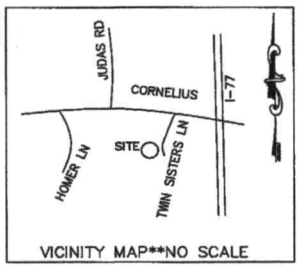
Owner / Applicant Signature: Heather Post | Date: 3/17/22 | Installed by: Specialty Septic

IMPROVEMENT PERMIT by: Cary Whit | Date: 2/24/22 | OPERATION PERMIT by: D. Inceberg | Date: 1/18/23

AUTHORIZATION TO CONSTRUCT by: Cary Whit | Date: 3/17/22 | Existing System Inspected by: | Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

2/24/22
CW



VICINITY MAP**NO SCALE

LAKE NORMAN

S19°27'07"E
119.96
E.I.P.
760 CONTOUR PER ACTUAL FIELD SURVEY
E.I.P. AT 19.87'

LOT 65
0.50 AC.
(LOT 15)

LOT 17
CORNELIUS C. PRESTON
1669/2492

ACCESS LOT
P.B.16 PG 80

53.3'
53.5'

50' BUFFER FROM 760 CONTOUR

pool

MOURNING DOVE

S82°19'10"E
229.68

N77°13'40"W
234.74 (TOTAL)

LOT 64
DIANA W.
REVOC TR.
FITZPATRICK
2829/253

15.5'
18.6'
26.8'
44.8'

pt
st

OFF-SITE SEPTIC
LOT 15A

R/W

L3 L4 L5
E.I.P.
99.70 (TOTAL)
N22°47'48"W
(BASE BEARING)
E.I.P.
R/W

NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.
5) PARCEL # 4627201781
6) DEED REF. BOOK 2588 PAGE 2039
7) PLAT BOOK 60 PAGE 40

Nest Homes Septic Site Plan 2.23.22

Proposed off-site PM, 25% reduction primary system and LPP T&J Panel repair. Base site plan by DAS with septic details by Pennington Soil Consulting. Pits and layout reviewed with ICHD. ICHD must issue septic permit.

supply line road crossing per 15A NCAC 18A .1900 rules and setbacks

L2 20' SSLE L1

TWIN SISTERS LANE
(60' PUBLIC R/W)

64.98 (TOTAL)
S23°20'58"E
L6 L7
I.P.S.
CP
S05°27'29"E
36.00
2" PIPE
R/W

Must abandon existing well on 13A and record septic drainfield and supply line easement with rule .1938j requirements.

o 60
b 30
5
r 28
old tank and beds
b 82
r 80
4
p 80
LOT 15A
LOT 14A
b 80
0.43 AC.
3
W 80
2
SEPTIC EASEMENT FOR LOT 15 CORNELIUS PROPERTY
o 80
p 60
b 37
1
LOT 13A
S83°16'26"E
200.00
S83°16'26"E
200.00
abandon old well
pressure manifold

NORTH CAROLINA PROFESSIONAL SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN
2/2/22

I.P.S.
S17°10'00"E
100.00
1/2" PIPE
ex. ditch and berm

LINE TABLE		
LINE	BEARING	LENGTH
L1	S 67°12'12" W	59.36'
L2	S 67°12'12" W	59.55'
L3	N 22°47'48" W	27.09'
L4	N 22°47'48" W	20.00'
L5	N 22°47'48" W	52.61'
L6	S 23°20'58" E	20.00'
L7	S 23°20'58" E	44.98'

LEGEND
= P.P. = POWER POLE
= POWER TRANS.
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
CP = COMPUTED POINT

PLOT PLAN
OF
LOT 15 CORNELIUS PROPERTY
(LOT 65 SISTERS COVE)
DAVIDSON TWSP., IREDELL CO., N.C.
SCALE = 1" = 40' DATE: FEB. 1, 2022
OWNER: NEST HOMES

0' 20' 40' 100'
SCALE IN FEET

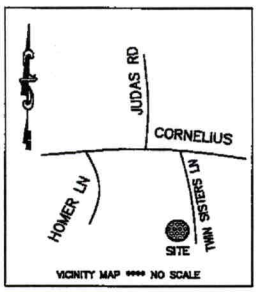
DAS
DON ALLEN & ASSOCIATES P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
131 CROSSLAKE PARK DR. SUITE 102* Mooresville , N.C. 28117
(704) 664-7029 (704) 664-8041 Fax

DAS DON ALLEN & ASSOCIATES, P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
131 Crosslake Park Drive – Suite 102 * Mooresville * NC * 28117
(704) 664-7029 (704) 664-8041 Fax

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 2458, page 46, and/or plat book 62, page 27, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C. my hand and seal on the 21, day of OCTOBER, A.D. 20 21.

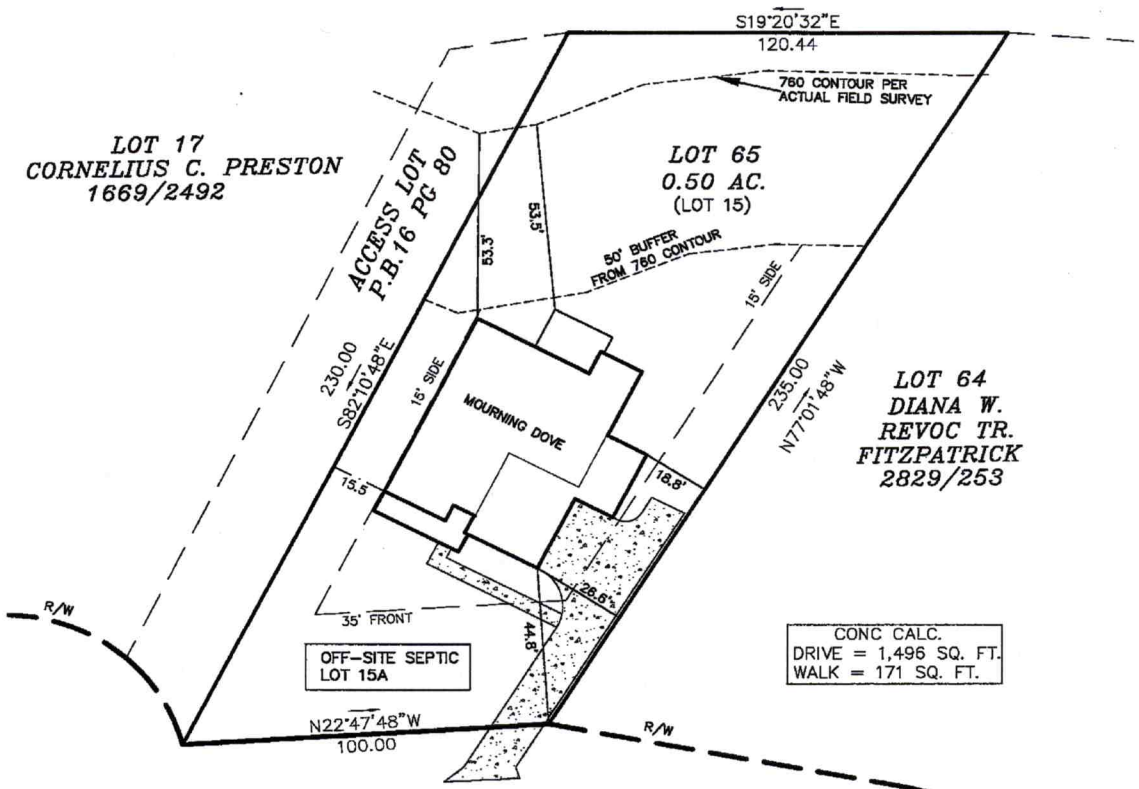
WILLIAM M. ALLEN, PLS

NORTH CAROLINA PROFESSIONAL SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN





LAKE NORMAN



0' 20' 40' 100'
SCALE IN FEET

TWIN SISTERS LANE
(60' PUBLIC R/W)

NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.
5) SETBACKS PER IREDELL RA ZONING

LEGEND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
CP = COMPUTED POINT

PLOT PLAN SURVEY

OF
174 TWIN SISTERS LANE
LOT 15 CORNELIUS SUBDIV. (LOT 65 SISTERS COVE)

SCALE 1" = 40'
DAVIDSON TWSP., IREDELL CO.,N.C.
ACQUIRED BY: NEST HOMES

FIELD BOOK:
FILE: SISTERS COVE 65
DC FILE:
TAX MAP NO: 4648562465

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Sheet 1 of 1
PROPERTY ID #: 4648562465
COUNTY: Iredell

SOIL/SITE EVALUATION
***for* ON-SITE WASTEWATER SYSTEM**
(Complete all fields in full)

OWNER: Nest Homes LLC — APPLICATION DATE 12/1/21
ADDRESS: PO Box 3965, Mooresville — DATE EVALUATED: 1/25/22
PROPOSED FACILITY: 4 bd/c home — PROPOSED DESIGN FLOW (.1949): 480 gpd — PROPERTY SIZE:
LOCATION OF SITE: 174 Twin Sisters Ln, Mooresville 28117 — PROPERTY RECORDED: yes
WATER SUPPLY: ☐ Private ☐ Public ☒ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut — TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	Linear	0 - 24	C SBK	SS SP FR SE	-	69	SAP inc in CL layer		.3 PS
		24 - 69	CL SBK	SS SP FR SE					
2	Linear	0 - 11	C SBK	SS SP FR SE	-	58			.3 PS
		11 - 32	CL SBK	SS SP FR SE					
		32 - 58	L SBK	SS SP FR SE					
3	Linear	0 - 9	SCL SBK	SS SP FR SE	-	63			.3 PS
		9 - 32	C SBK	SS SP FR SE					
		32 - 63	CL SBK	SS SP FR SE					
4	Linear	0 - 5	Topsoil		-	53	SAP inc in CL layer		.3
		5 - 17	C SBK	SS SP FR SE					
		17 - 53	CL SBK	SS SP FR SE					
		53 - 61	SAP LS	FR					

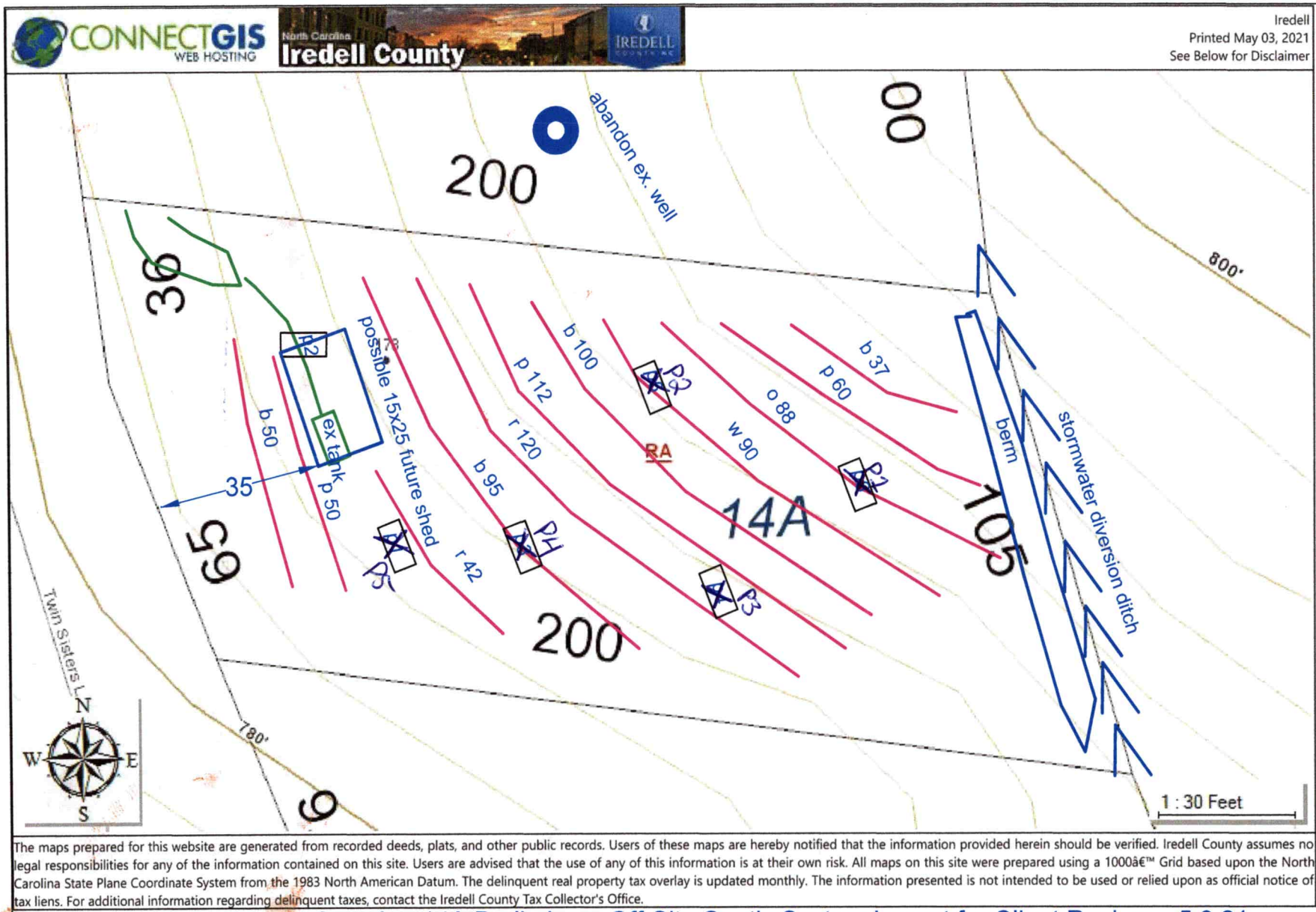
DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25%	50%
Site LTAR	.3	.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Cory Whicker
OTHER(S) PRESENT: Paul Pennyger

COMMENTS: 0-9 Topsoil .3 SAP inc in CL layer
9-31 C SBK PS
31-53 CL SBK

5

Updated February 2014

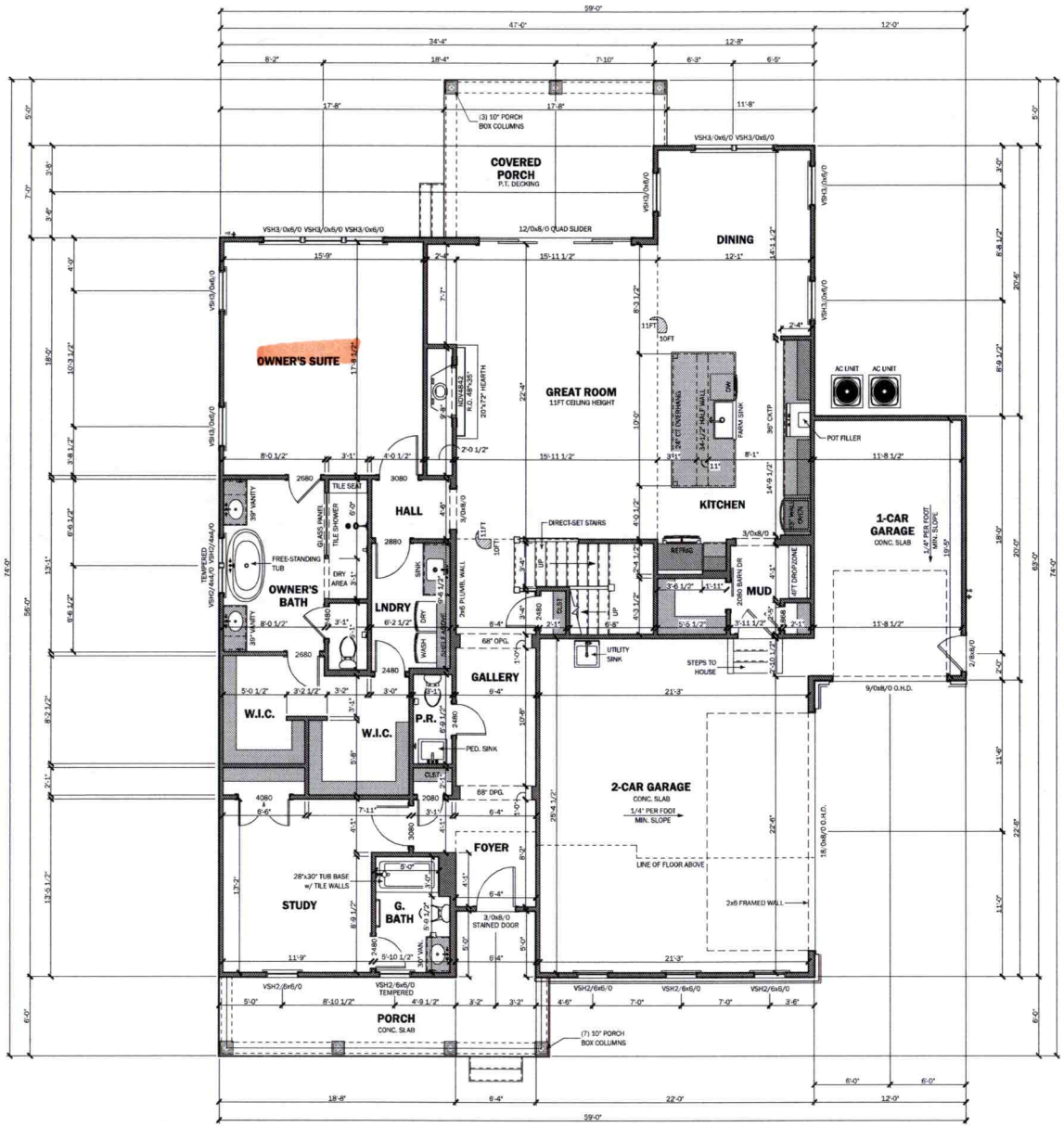


The maps prepared for this website are generated from recorded deeds, plats, and other public records. Users of these maps are hereby notified that the information provided herein should be verified. Iredell County assumes no legal responsibilities for any of the information contained on this site. Users are advised that the use of any of this information is at their own risk. All maps on this site were prepared using a 1000â€™ Grid based upon the North Carolina State Plane Coordinate System from the 1983 North American Datum. The delinquent real property tax overlay is updated monthly. The information presented is not intended to be used or relied upon as official notice of tax liens. For additional information regarding delinquent taxes, contact the Iredell County Tax Collector's Office.

Nest Homes - Sisters Cove Lot 14A Preliminary Off-Site Septic System Layout for Client Review 5.3.21

Approx. proposed septic lines and backhoe pits. Need property lines staked for location verification. Any septic system must be approved and permitted by the ICHD. Future shed must be approved by Iredell Co. Base site plan from Iredell Co. GIS website.

59'



FIRST FLOOR PLAN

SCALE: 1/4" = 1'-0"
WALL HEIGHT: 10'-1 1/8"
WINDOW HEADERS @ 8'-0" A.F.F.

236 RACEWAY DRIVE
SUITE 7
MOORESVILLE, NC 28117
704-208-4251
www.nesthomes.com

Township/County
DAVIDSON TOWNSHIP
IREDELL COUNTY

Engineer

INTELLIGENT DESIGN ENGINEERING
1945 J N PEASE PLACE #204
CHARLOTTE, NC 28262
CHAD RITTER, P.E.
CORPORATE LIC. #C-3118
704-335-7200

Stamp/Seal

Project Name/Owner
THE MOURNING DOVE
SPEC HOME
SISTERS COVE
LOT 65
172 TWIN SISTERS LN.
MOORESVILLE, NC 28117

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Date
8/9/2021

Drawn By
RES

Reviewed By
—

Plan Set Scale
24x36 sheet
1/4" = 1'-0"
11x17 sheet
1/8" = 1'-0"

Project Plan Code
—

Drawing Set
FOR CONSTRUCTION

Sheet Title Description
FIRST FLOOR PLAN

Sheet Number
A3.0

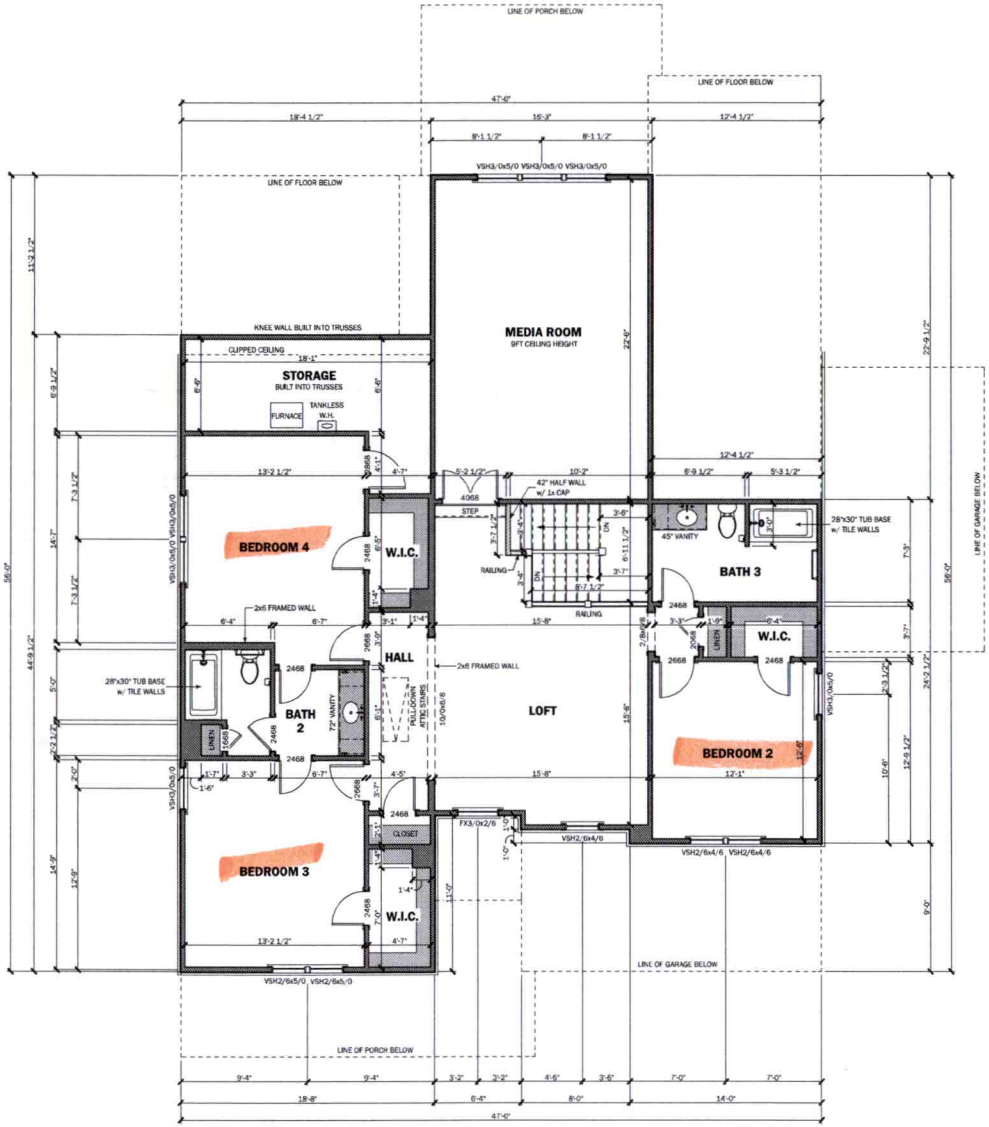
Master Plan Version
v1.0

Cory Whit 2/24/22

3/17/22

Heather Poston

174 Twin Sisters Ln



SECOND FLOOR PLAN

SCALE: 1/4" = 1'-0"
WALL HEIGHT: 9'-1 1/8"
WINDOW HEADERS @ 8'-0" A.F.F.

Corey Wick 2/24/22

Heather Poston 3/17/22

NEST HOMES
236 RACEWAY DRIVE
SUITE 7
MOORESVILLE, NC 28117
704-308-4251
www.nesthomes.com

Township/County
DAVIDSON TOWNSHIP
IREDELL COUNTY

Engineer

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#204
CHARLOTTE, NC 28262
CHAD RITTER, P.E.
CORPORATE LIC. #C-3118
704-335-7200

Stamp/Seal

Project Name/Owner
THE MOURNING DOVE
SPEC HOME
SISTERS COVE
LOT 85
172 TWIN SISTERS LN.
MOORESVILLE, NC 28117

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Date
8/9/2021

Drawn By
RES

Reviewed By
—

Plan Set Scale
24x36 sheet
1/4" = 1'-0"
11x17 sheet
1/8" = 1'-0"

Project Plan Code
—

Drawing Set
FOR CONSTRUCTION

Sheet Title Description
SECOND FLOOR PLAN

Sheet Number
A4.0

Master Plan Version
v1.0

RECEIVED DEC 0 1 2021

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM AP-322534 $500.00

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED. APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted: ( ) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: **(PRINT CLEARLY)**

Applicant Name: Nest Homes LLC **Address:** PO Box 3965 , Mooresville NC **Zip:** 28117

Applicant Email: hposton@nesthomes.com **Phone:** 980-500-1238 **Alt. Phone:**

Owner Name: SC Landholdings LLC **Address:** PO Box 3965 , Mooresville NC **Zip:** 28117

Owner Email: hposton@nesthomes.com **Phone:** 980-500-1238 **Alt. Phone:**

Property Information:

Street Address: 174 Twin Sisters Lane

Subdivision Name: Sisters Cove **Section/Phase:** S1 **Lot Number:** 65/15

Driving Directions: From I-77 & Exit 36 (Hwy 150/ River Hwy) travel west to Bluefield Road, Right on Bluefield to Cornelius Rd, left on Cornelius Rd; left on Twin Sisters Lane

Site Development Information: ***(check or complete ALL that apply***

CHECK FOUNDATION TYPE

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem:

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
( ) Swimming Pool
( ) Other Addition/Structure:

(X) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development: Type of Business:
Square Footage of Building: Max. Number of Employees: Max. Number of Seats/Beds/Other:

Water Supply: ( ) Replacement Well – Reason:
( ) Multi-connection Well Number of Houses: Number of Persons:

( ) New Well ( ) Existing Well ( ) Community Well ( ) City Water (X) Other Public Water

Desired Septic System Type: ***(you may rank in order of preference)*** Year existing system installed:
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative (X) Modified Conventional ( ) Other:

Please answer the following to the best of your ability:
( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (X) No Is the site subject to approval by any other public agency?

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: Heather Poston 11/19/2021
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

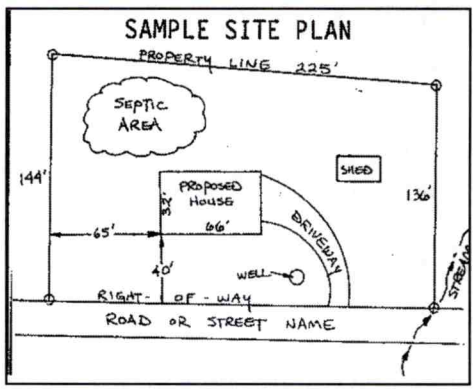
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

SITE PLAN WORKSHEET

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM OR WELL PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

- **( ) Property Line measurements are clearly identified**
- **( ) All proposed structures are indicated**
- **( ) Front and side setbacks from property line**
- **( ) Preferred driveway location**
- **( ) Preferred well location**
- **( ) Preferred septic system location**
- **( ) North arrow, or other sufficient indicator of direction**



Circle N/A on the following if appropriate:

Location of septic systems and wells within 100' of your property	**N/A**
Location of easements and rights of ways on your property	**N/A**
Location of any designated wetlands on the property	**N/A**

USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

**** Please see attached plot plan ****

Signature: Heather Poston — 11/19/2021

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — **DATE**

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

1. * APPLICANT AND OWNER ARE THE SAME. * (*Sign here*) Eric Wood

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative: *Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship*
In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:
Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form. If there are multiple property owners, then all property owners must sign the form that designates a legal representative.
By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

2. I, Eric Wood, am the legal owner(s) of the property located at 174 Twin Sisters Lane, identified as

PIN (Parcel Identification Number) 4648562465.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Heather Poston, Nest Homes LLC, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Eric Wood — Signature of Owner(s)

11/19/2021 — Date

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

***** Initial all lines below to indicate you have submitted each form and completed every site requirement *****

HP **Complete all Environmental Health forms**:
- x Application
- x Site Plan with dimensions of proposed structure, addition, pool etc.
- x Documentation to Authorize Owner Agent (if the property owner is not the applicant)
- x Copy of Zoning Permit when applicable
- x Sign this sheet after you have completed all items

HP **Lot must be cleared of heavy undergrowth.** In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with **50 feet of visibility** in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

HP **Clearly mark all property corners by locating existing iron or concrete markers**. Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only).
'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged.**

HP **Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted.** The proposed structure, etc. **must be staked** out on the property as per the site plan.

HP If an **Authorization to Construct (AC) is desired**, submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application.
Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are non-refundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.
- **All utilities shall be marked before pits are dug. Call NC 811 for this service.**
- **The applicant/agent is responsible for securing these services**
- **Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.**
- **The EH specialist will contact you when your application is ready to be processed for pit scheduling.**
- **Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work.**

By signing below I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure those services (if applicable).

Signature Heather Poston **Date** 11/19/2021

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625